# FORM 1

14020434046

FEC

#### STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE

				Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Sullivan for US S	enate	<u> </u>		<u> </u>
		<u> </u>	1 1 1 1 1	<u> </u>
ADDRESS (number and street)	3705 Arctic Blvd #447			
(Check If address is changed)				
- '	Anchorage		AK   9	9503-5774
	CITY A	<del>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </del>	STATE ▲	ZIP CODE A
COMMITTEE'S E-MAIL ADDRE	:SS			
(Check if address	krowell@sullivan2014.	com		
Is changed)		<u>                                     </u>		
	Optional Second E-Mail Ad	dress		
		<del>1 1 4 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4</del>		
2. DATE 05 28			1 1 1 1 1	
3. FEC IDENTIFICATION NU	JMBER ▶ Ç C	00001093		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief	it is true, correct ar	nd complete.
Type or Print Name of Treasure	r Eric Campbell			
Signature of Treasurer Eric C	Campbell Luc Co	mphell	Date 06	19 201 <b>4</b>
NOTE: Submission of false, errone		may subject the person signing ON SHOULD BE REPORTED		e penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commis		FEC FORM 1 (Revised 06/2012)

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TYPE OF CO	OMMITTEE Committee:				
(a)	This committee is a princi	ipal campaign	n committee. (Con	aplete the candidate inf	formation below.)
(b)	This committee is an authinformation below.)	norized commi	ittee, and is NOT	a principal campaign of	committee. (Complete the candidate
Name of Candidate	Dan Sullivan		<u> </u>		<del>                                     </del>
Candidate Party Affiliation	on	Office Sought:	House	Senate	State AK President 00 District 00
(c)	This committee supports/o	opposes only	one candidate, a	nd is NOT an authorize	od committee.
Name of Candidate					
Party Com	ımittee:		-	•	• • • • •
(d)	This committee is a		(National, State or subordinate)	committee of the	(Democratic, Republican, etc.) Part
Political Ad	ction Committee (PAC	C):			
(e)	This committee is a separ	rate segregate	ed fund. (Identify	connected organization of	on line 6.) Its connected organization is
	Corporation		Corp	oration w/o Capital Stoo	ck Labor Organization
	Corporation  Membership Orga	anization	•	oration w/o Capital Stoc	ck Labor Organization  Cooperative
	Membership Orga		•	Association	•
<b>(f)</b>	Membership Orga In addition	, this committe	Trade	Association	Cooperative
<b>(f)</b>	Membership Orga In addition This committee supports/	, this committe opposes more	Trade ee is a Lobbyist/Ro a than one Federa e)	Association egistrant PAC. al candidate, and is NO	Cooperative
<b>(f)</b>	Membership Orga In addition This committee supports/ committee. (i.e., nonconne In addition, this con	, this committed opposes more committed committed is a Lo	Trade e is a Lobbyist/Ro than one Feder e) obbyist/Registrant	Association egistrant PAC. al candidate, and is NO	Cooperative  T a separate segregated fund or part
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Write or Type Committee Name

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99645-9521

ZIP CODE

STATE

Telephone number

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safety deposit boxes or maintains funds.

Kathlene Rowell

Palmer

13630 E GRASSLAND CIR

CITY

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents

Full Name of

Mailing Address

Title or Position Assistant Treasurer

Designated Agent

T 4020

### FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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Banks or Other Depositories safety deposit boxes or mainto Name of Bank, Depository, etc.	ains funds.		ids accounts, rents
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	CITY 🛦	STATE A	ZIP CODE 🛕
Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundraising   can Majority	Representative, or Leade	[ ADDITIONAL ] ship PAC Sponsor
Mailing Address	228 S. Washington Street, Suite 11		
	Alexandria	VA 22	314-5404
Relationship:	C TY <b>≜</b>	STATE .	ZIP CODE
Connected Organization	Affiliated Committee Subject Joint Fundraising F	Representative Lead	ership PAC Sponsor
Designated Agent			[ ADDITIONAL ]
Full Name		111111	
Title or Position	CITY &	STATE	ZIP CODE
	Telep	phone number	
Joint Fundraiser Participant			ADDITIONAL ]
سيسيب		FEC ID number C	

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Banks or Other Depositorie safety deposit boxes or maint	ains funds.	ositories in which the co	ommittee deposits funds	
Name of Bank, Depository, et	C.			[ADDITIONAL]
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	CITY	<b>_</b>	STATE &	ZIP CODE A
Name of Any Connected Or Gardner Daines Sulli	ganization, Affiliated Committ van Victory Fund	se, Joint Fundralsing	Representative, or Lea	[ ADDITIONAL ] Idership PAC Sponsor
	901 N Washington Street			
Mailing Address	- I I I I I I I I I I I I I I I I I I I			
	Suite 700			
	Alexandria		<u>\^</u>	22314-
Relationship:	CITY	<b>*</b>	STATE .	ZIP CODE
Connected Organization	Affiliated Committee	X Joint Fundraising i	Representative L	eadership PAC Sponsor
Designated Agent				[ADDITIONAL]
Full Name				
Mailing Address	<u> </u>		***	
				_
Title or Position	CIT	Y •	STATE	ZIP CODE &
		Tele	phone number	
Joint Fundralser Participant				[ ADDITIONAL ]
		لسبب	FEC ID number C	

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DANA K MCCALLUM SUPERINTELIDENT

PATE DIFFICE BL SUFFE 232 WASHINETON, DE 20510-71 PROPE (202) 224-0322

## HNITELL STATES SENATE

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:
HAND DELIVERED Date of Receipt
USPS FIRST CLASS MAILPostmark
USPS REGISTERED/CERTIFIEDPostmark
USPS PRIORITY MAIL
USPS EXPRESS MAIL Postmark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS ————————————————————————————————————
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION
POSTMARK ILLEGIBLE   NO POSTMARK
FAXDate of Receipt
OTHER Date of Receipt or Postmark
PREPARER DATE PREPARED 6-23-14



SEN PATCH



SEN PATCH